

Utah Medicaid COVID-19 EMERGENCY Guidance: Temporary Adjustments to Applied Behavior Analysis (ABA) Services Policy

Utah Medicaid is committed to ensuring our members continue to receive products and services with no interruptions or delays due to the novel coronavirus (COVID-19) outbreak. In response, Utah Medicaid is temporarily modifying certain policies. Providers are expected to provide only medically necessary services. All services rendered may be subject to post-payment review.

The following adjustments have been made to Applied Behavior Analysis (ABA) services policy to Early Periodic Screening Diagnosis and Treatment (EPSDT) eligible individuals with Autism Spectrum Disorder (ASD). Utah Medicaid is making these changes to reduce the amount of interpersonal contact service providers and Medicaid members need to have with one another while maintaining access to needed services:

- Telehealth may be used, without geographic restriction, to provide ABA services as outlined below.
- Telehealth services should be delivered with only one patient at a time.
- To bill services provided via telehealth, providers must mark their claims with "Place of Service 02" which allows Medicaid to see that the service was delivered via telehealth.
- Utah Medicaid is currently allowing these adjustments through the end of the COVID emergency period.
- Please be aware of recent federal guidance from regarding HIPAA compliant telehealth performance platforms:
<https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html>

This guidance states in part:

“A covered health care provider that wants to use audio or video communication technology to provide telehealth to patients during the COVID-19 nationwide public health emergency can use any non-public facing remote communication product that is available to communicate with patients. Office of Civil Right (OCR) is exercising its enforcement discretion to not impose penalties for noncompliance with the HIPAA Rules in connection with the good faith provision of telehealth using such non-public facing audio or video communication products during the COVID-19 nationwide public health emergency.”

Although allowed under the emergency guidance from the Health and Human Services at the federal level, Utah Medicaid policy requires providers to use HIPAA compliant means of communicating (i.e., Skype for Business, Updox, VSee, Zoom for Healthcare, Doxy.me, Google G Suite Hangouts Meet) to the greatest extent possible.

Temporary Code-Specific Changes		
Code	Code Descriptor	Temporary COVID Adjustment
97151	Behavioral and functional assessments / recertifications	<ul style="list-style-type: none"> • May be delivered via telehealth.
97153	Adaptive Behavior Treatment by Protocol	<ul style="list-style-type: none"> • May be delivered via telehealth where clinically appropriate (e.g. the patient is able to sustain progress through this modality and has available on-site adult supervision to aid in setting up the session, prompting, redirection, etc.; or the patient has the appropriate skill level and is sufficiently advanced in their programs to engage with the RBT independently). Provider must submit documentation to demonstrate appropriateness of delivering services via telehealth.
97155	Adaptive Behavior Treatment with Protocol Modification (parent training with child present)	<ul style="list-style-type: none"> • May be delivered via telehealth with appropriate clinical justification in lieu of in-person RBT 97153 services. • This service may be delivered by an RBT (using the 52 modifier). • 10% of services provided by the RBT must be supervised by a BCBA with 50% being direct supervision.
97156	Family Adaptive Behavior Treatment	<ul style="list-style-type: none"> • May be delivered via telehealth with appropriate clinical justification in lieu of in-person RBT 97153 services.

	Guidance (parent training with or without child present)	<ul style="list-style-type: none"> • This service may be delivered by an RBT (using the 52 modifier). • 10% of services provided by the RBT must be supervised by a BCBA with 50% being direct supervision.
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Prior Authorization Guidance

- To add 97155 and 97156 telehealth service codes to an existing prior authorization request, submit the Applied Behavior Analysis (ABA) Services Prior Authorization Request Form indicating the additional codes and unit volumes needed for the remainder of the certification period.
- To alleviate administrative burden, we are not asking that the supporting clinical documentation be resubmitted for approval. We are also not asking that previously authorized units be adjusted to account for any reductions in utilization.
- If a recertification occurs during this emergency period, request the total service hours needed, broken down by the setting in which these services will be delivered, along with supporting clinical documentation.

Providers can send additional comments or questions to medicaidcriteria@utah.gov or 801-538-6155.